

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	GUIDE DEVICE AND PLATE INSERTER
Attorney Docket Number::	101896-0233
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	9
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Tushar
Family Name::	Patel
City of Residence::	Potomac
State or Province of Residence::	MD
Country of Residence::	US
Street of mailing address::	8113 Buchspark Lane
City of mailing address::	Potomac
State or Province of mailing address::	MD
Postal or Zip Code of mailing address::	20854

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Eric  
Middle Name:: D.  
Family Name:: Kolb  
City of Residence:: Quincy  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 308 Quarry Street  
City of mailing address:: Quincy  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02169

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jonathan  
Family Name:: Fanger  
City of Residence:: Fall River  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 3 Rolling Green Drive, Apt. H  
City of mailing address:: Fall River  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02720

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Family Name:: Fessler

City of Residence:: Winnetka  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of mailing address:: 977 Ash Street  
City of mailing address:: Winnetka  
State or Province of mailing address:: IL  
Postal or Zip Code of mailing address:: 60093

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Alan  
Family Name:: Crockard  
City of Residence:: London  
Country of Residence:: United Kingdom  
Street of mailing address:: The National Hospital for Neurology and  
Neurosurgery, Queen Square  
City of mailing address:: London  
Country of mailing address:: United Kingdom  
Postal or Zip Code of mailing address:: WC 1N 3BG

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Todd  
Family Name:: Albert  
City of Residence:: Penn Valley  
State or Province of Residence:: PA  
Country of Residence:: US  
Street of mailing address:: 1434 Flat Rock Road  
City of mailing address:: Penn Valley  
State or Province of mailing address:: PA

Postal or Zip Code of mailing address:: 19072

**Correspondence Information**

Correspondence Customer Number:: 021125

**Representative Information**

Representative Customer Number:: 021125

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/409,958	04/09/2003